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PTO/SB/01 (10-00)
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| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) | Attorney Docket Number | DEP 5305USPCT | |
| | First Named Inventor | REVIE | |
| | COMPLETE IF KNOWN | | |
| | Application Number | 10/598,626 | |
| | Filing Date | 09/06/2006 | |
| | Group Art Unit | TBD | |
| | Examiner Name | TBD | |
| <p>As a below named inventor, I hereby declare that:</p> <p>My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> | | | |
| <p>ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS (Title of the Invention)</p> | | | |
| <p>the specification of which</p> <p><input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (03/10/2005) as PCT International Application Number PCT/GB05/00933 and was amended on (MM/DD/YYYY) <input type="checkbox"/></p> <p><i>REVIEWED THE CONTENTS OF THE APPLICATION IN MARCH 2005 AND HAVE NOT REVIEWED SINCE THAT DATE. AT THAT REVIEW, UNDERSTOOD THE CONTENTS OF THE IDENTIFIED SPECIFICATION</i></p> | | | |
| <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> | | | |
| <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p> | | | |
| <p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed</p> | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed YES <input type="checkbox"/> NO <input type="checkbox"/> |
| | | | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | |

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
|-----------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| | | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto |

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| Application Serial No. | Filing Date | Status |
|------------------------|-------------|----------------------------------|
| | | Patented Patented Patented |

I hereby appoint:

☒ Practitioners at Customer Number **000027777** ... Place Customer Number Bar Code Label Here

AND

☐ Practitioner(s) named below:
 Name _____ Registration Number _____

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.

Direct all correspondence to: Customer Number **000027777** OR ☐ Correspondence address below
☒ or Bar Code Label

Name:

Address:

Address:

City:

State:

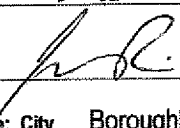
ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|------------|
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) IAN | | Family Name or Surname REVIE | |
| Inventor's Signature  | | Date 3RD AUGUST 2007 | |
| Residence: City Boroughbridge | | State North Yorkshire | Country UK |
| Citizenship UK | | | |

Mailing Address Tutt House, New Row

| | | | |
|--------------------|-------|--------------|------------|
| City Boroughbridge | State | ZIP YO51 9AX | Country UK |
|--------------------|-------|--------------|------------|

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| | | | |
|------------------------------------------------|-----------------------|-------------------------------------------------------------------------------|----------------|
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) ALAN | | Family Name or Surname ASHBY | |
| Inventor's Signature | | Date | |
| Residence: City York | State North Yorkshire | Country UK | Citizenship UK |

Mailing Address 19 Clifton Green

| | | | |
|-----------|-----------------------|--------------|------------|
| City York | State North Yorkshire | ZIP YO30 6LN | Country UK |
|-----------|-----------------------|--------------|------------|

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| | | | |
|----------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF THIRD INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) THORSTEN | | Family Name or Surname BURGER | |
| Inventor's Signature | | Date | |
| Residence: City Muenchen | State | Country Germany | Citizenship German |
| Mailing Address Speyerstr. 8 | | | |
| City Muenchen | State | ZIP 80804 | Country Germany |

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| | | | |
|---------------------------------------------------------|--------------|-------------------------------------------------------------------------------|---------------------------|
| NAME OF SOLE OR FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) STEFAN | | Family Name or Surname VILSMEIER | |
| Inventor's Signature | | Date | |
| Residence: City Kufstein | State | Country Austria | Citizenship GERMAN |
| Mailing Address Oberer Stadtplatz 6 | | | |
| City Kufstein | State | ZIP 6330 | Country Austria |

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| | | | |
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| NAME OF FIFTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) ASSAF | | Family Name or Surname GOVARI | |
| Inventor's Signature | | Date | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address Vitzo 1 | | | |
| City Haifa | State | ZIP | Country Israel |

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| | | | |
|-------------------------------------------------------|--------------|-------------------------------------------------------------------------------|---------------------------|
| NAME OF SIXTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) DUDI | | Family Name or Surname REZNICK | |
| Inventor's Signature | | Date | |
| Residence: City Shimshit | State | Country Israel | Citizenship Israel |
| Mailing Address Peleg 33 st. | | | |
| City Shimshit | State | ZIP POB: 17906 | Country Israel |

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| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SEVENTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) PESACH | | Family Name or Surname SUSEL | |
| Inventor's Signature | | Date | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address 43 Varida St. | | | |
| City Haifa | State | ZIP | Country Israel |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF EIGHTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) AVI | | Family Name or Surname SHALGI | |
| Inventor's Signature | | Date | |
| Residence: City Tel Aviv | State | Country Israel | Citizenship Israel |
| Mailing Address Kashani 3 rd st., Ramat Aviv Gimel | | | |
| City Tel Aviv | State | ZIP 69499 | Country Israel |

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| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) | Attorney Docket Number | DEP 5305USPCT | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------|----------------------|-----------------------------------------|--|--|--|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | First Named Inventor | REVIE | | | | | | | | | | | |
| | <i>COMPLETE IF KNOWN</i> | | | | | | | | | | | | |
| | Application Number | 10/598,626 | | | | | | | | | | | |
| | Filing Date | 09/06/2006 | | | | | | | | | | | |
| | Group Art Unit | TBD | | | | | | | | | | | |
| | Examiner Name | TBD | | | | | | | | | | | |
| <p>As a below named inventor, I hereby declare that:</p> <p>My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> | | | | | | | | | | | | | |
| ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS <i>(Title of the Invention)</i> | | | | | | | | | | | | | |
| <p>the specification of which</p> <p><input type="checkbox"/> is attached hereto OR</p> <p><input checked="" type="checkbox"/> was filed on (03/10/2005) as PCT International Application Number PCT/GB05/00933 and was amended on (MM/DD/YYYY) <input type="text"/></p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.</p> | | | | | | | | | | | | | |
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| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | | | | | | |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | | | | | | | | |

| DECLARATION - Utility or Design Patent Application | | |
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| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB02B attached hereto. |
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| Application Serial No. | Filing Date | Status |
| | | Patented Patented Patented |
| I hereby appoint: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 — </div> <div style="text-align: right;"> Place Customer Number Bar Code Label Here </div> </div> <p style="margin-top: 10px;">AND</p> <div> <input type="checkbox"/> Practitioner(s) named below: </div> <div style="margin-left: 100px;"> <u>Registration Number</u> </div> | | |
| as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | | |
| Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239. | | |
| Direct all correspondence to: <div style="display: flex; align-items: center; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Customer Number or Bar Code Label </div> <div style="border: 1px solid black; padding: 0 10px;">000027777</div> <div>OR</div> <div> <input type="checkbox"/> Correspondence address below </div> </div> | | |
| Name: | | |
| Address: | | |
| Address: | | |
| City: | State: | ZIP |
| Country | Telephone: | Fax: |

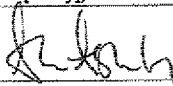
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|-----------------------------------------------|---------------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) IAN | | Family Name or Surname REVIE | |
| Inventor's Signature | | Date | |
| Residence: City | Boroughbridge | State | North Yorkshire |
| Country | | UK | |
| Citizenship | | UK | |

Mailing Address Tutt House, New Row

| | | | | | | | |
|------|---------------|-------|--|-----|----------|---------|----|
| City | Boroughbridge | State | | ZIP | YO51 9AX | Country | UK |
|------|---------------|-------|--|-----|----------|---------|----|

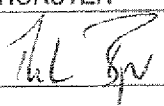
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|-------------------------------------------------------------------------------------------------------------|------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) ALAN | | Family Name or Surname ASHBY | |
| Inventor's Signature  | | Date 14 August 2007 | |
| Residence: City | York | State | North Yorkshire |
| Country | | UK | |
| Citizenship | | UK | |

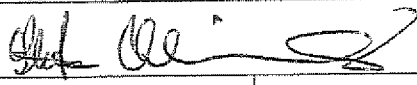
Mailing Address 19 Clifton Green

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|------|------|-------|--------------------|-----|----------|---------|----|
| City | York | State | North Yorkshire | ZIP | YO30 6LN | Country | UK |
|------|------|-------|--------------------|-----|----------|---------|----|

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| | | | |
|-------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------|--|
| NAME OF THIRD INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) THORSTEN | | Family Name or Surname BURGER | |
| Inventor's Signature  | | Date July 19, 2007 | |
| Residence: City | Muenchen | State | |
| Country | | Germany | |
| Citizenship | | German | |
| Mailing Address Speyerstr. 8 | | | |
| City | Muenchen | State | |
| ZIP | | 80804 | |
| Country | | Germany | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SOLE OR FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) STEFAN | | Family Name or Surname VILSMEIER | |
| Inventor's Signature  | | Date | |
| Residence: City Kufstein | State | Country Austria | Citizenship GERMAN |
| Mailing Address Oberer Stadtplatz 6 | | | |
| City Kufstein | State | ZIP 6330 | Country Austria |

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| | | | |
|-------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF FIFTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) ASSAF | | Family Name or Surname GOVARI | |
| Inventor's Signature | | Date | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address Vitzo 1 | | | |
| City Haifa | State | ZIP | Country Israel |

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| NAME OF SIXTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) DUDI | | Family Name or Surname REZNICK | |
| Inventor's Signature | | Date | |
| Residence: City Shimshit | State | Country Israel | Citizenship Israel |
| Mailing Address Peleg 33 st. | | | |
| City Shimshit | State | ZIP POB: 17906 | Country Israel |

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| NAME OF SOLE OR FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) STEFAN | | Family Name or Surname VILSMEIER | |
| Inventor's Signature | | Date | |
| Residence: City Kufstein | State | Country Austria | Citizenship GERMAN |
| Mailing Address Oberer Stadtplatz 6 | | | |
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| NAME OF FIFTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) ASSAF | | Family Name or Surname GOVARI | |
| Inventor's Signature <i>A.G.</i> | | Date <i>A.G. 18/09/07</i> | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address Vitzo 1 | | | |
| City Haifa | State | ZIP | Country Israel |

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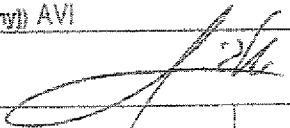


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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF SOLE OR FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) STEFAN | | Family Name or Surname VILSMEIER | |
| Inventor's Signature | | Date | |
| Residence: City Kufstein | State | Country Austria | Citizenship GERMAN |
| Mailing Address Oberer Stadtplatz 6 | | | |
| City Kufstein | State | ZIP 6330 | Country Austria |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF FIFTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) ASSAF | | Family Name or Surname GOVARI | |
| Inventor's Signature | | Date | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address Vitzo 1 | | | |
| City Haifa | State | ZIP | Country Israel |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF SIXTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) DUDI | | Family Name or Surname REZNICK | |
| Inventor's Signature | | Date 29/7/07 | |
| Residence: City Shimshit | State | Country Israel | Citizenship Israel |
| Mailing Address Peleg 33 st. | | | |
| City Shimshit | State | ZIP POB: 17906 | Country Israel |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SEVENTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) PESACH | | Family Name or Surname SUSEL | |
| Inventor's Signature <i>P. SUSEL</i> | | Date 18/09/2007 | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address 43 Varida St. | | | |
| City Haifa | State | ZIP | Country Israel |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF EIGHTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) AVI | | Family Name or Surname SHALGI | |
| Inventor's Signature | | Date | |
| Residence: City Tel Aviv | State | Country Israel | Citizenship Israel |
| Mailing Address Kashani 3 rd st., Ramat Aviv Gimel | | | |
| City Tel Aviv | State | ZIP 69499 | Country Israel |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------|--------------------|
| NAME OF SEVENTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) PESACH | | Family Name or Surname SUSEL | |
| Inventor's Signature | | Date | |
| Residence: City Haifa | State | Country Israel | Citizenship Israel |
| Mailing Address 43 Varida St. | | | |
| City Haifa | State | ZIP | Country Israel |
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| NAME OF EIGHTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) AVI | | Family Name or Surname SHALGI | |
| Inventor's Signature  | | Date Sep 19, 2007 | |
| Residence: City Tel Aviv | State | Country Israel | Citizenship Israel |
| Mailing Address 32 Shlomo Ben-Yosef st., Ramat Aviv Gimel | | | |
| City Tel Aviv | State | ZIP 69125 | Country Israel |